

PART B - FEE(S) TRANSMITTAL

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24247 7590 06/20/2008

TRASK BRITT
P.O. BOX 2550
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09/18/2008 SSANDAR1 00000013 201469 10092185

01 FC:1501 70.00 DA 1370.00 OP

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(Depositor's name)	
VIA ELECTRONIC FILING	
(Signature)	
September 17, 2008	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/09/2008	03/06/2002	Raymond J. Beffa	3037.10US (95-1074.10)	1655

TITLE OF INVENTION: METHOD FOR SORTING INTEGRATED CIRCUIT DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$1370	\$1440	09/22/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
RODRIGUEZ, JOSEPH C	3653	209-573000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) REMOVED . Use of a Customer Number is required. (Faxed separately)	1. TraskBritt 2. 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

MICRON TECHNOLOGY, INC.

Boise, Idaho

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted previously submitted	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	<input type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1469 (enclose an extra copy of this form).

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Authorized Signature

Date September 17, 2008

Typed or printed name James R. Duzan

Registration No. 28,393

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Adjustment date: 09/18/2008 SSANDAR1
12/02/2004 MISC FEE 00000102 10092185
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OMB 0651-0033

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